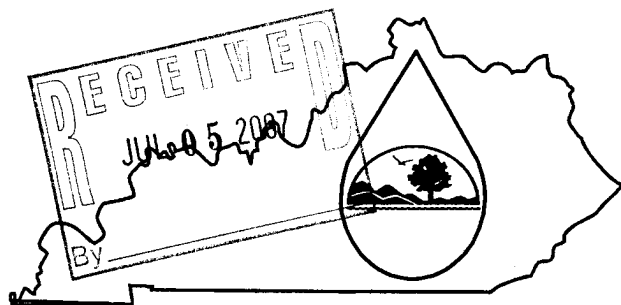


# KPDES FORM 1

✓ AI 2050



## KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

### PERMIT APPLICATION

This is an application to: (check one)

- ☐ Apply for a new permit.  
☒ Apply for reissuance of expiring permit.  
☐ Apply for a construction permit.  
☐ Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Short Form C

For additional information contact:

KPDES Branch (502) 564-3410

CHK 1,000

<b>I. FACILITY LOCATION AND CONTACT INFORMATION</b>		AGENCY USE	0	0	4	1	7	2	6
A. Name of business, municipality, company, etc. requesting permit General Electric Consumer and Industrial									
<b>B. Facility Name and Location</b>					<b>C. Facility Owner/Mailing Address</b>				
Facility Location Name:					Owner Name:				
Appliance Park					General Electric Company				
Facility Location Address (i.e. street, road, etc.):					Mailing Street:				
Appliance Park					Appliance Park AP1-D35				
Facility Location City, State, Zip Code:					Mailing City, State, Zip Code:				
Louisville, Kentucky 40225					Louisville, Kentucky 40225				
					Telephone Number: 502-452-4807				

### II. FACILITY DESCRIPTION

A. Provide a brief description of activities, products, etc: Mfg. facility that assembles household appliances including washers, dishwashers, refrigerator components, and refrigerators. The facility also has an R & D lab and a warehouse.

### B. Standard Industrial Classification (SIC) Code and Description

Principal SIC Code & Description:	3639/ Household Manufacturing Dishwashing Machines		
Other SIC Codes:	3632	3633	5064

### III. FACILITY LOCATION

A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: Jefferson	City where facility is located (if applicable): Louisville, Kentucky
C. Body of water receiving discharge: Unnamed tributary to Blue Spring Ditch to Northern Ditch of Pond Creek	
D. Facility Site Latitude (degrees, minutes, seconds): 38 degrees, 9 minutes, 37.8 seconds	Facility Site Longitude (degrees, minutes, seconds): 85 degrees, 39 minutes, 33.8 seconds
E. Method used to obtain latitude & longitude (see instructions): Topographic Map	
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable): N/A	

**IV. OWNER/OPERATOR INFORMATION****A. Type of Ownership:**☐ Publicly Owned ☒ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned**B. Operator Contact Information (See instructions)**

Name of Treatment Plant Operator:

N/A

Telephone Number:

N/A

Operator Mailing Address (Street):

N/A

Operator Mailing Address (City, State, Zip Code):

N/A

Is the operator also the owner?

Yes ☐ No ☐

Is the operator certified? If yes, list certification class and number below.

Yes ☐ No ☐

Certification Class:

N/A

Certification Number:

N/A

**V. EXISTING ENVIRONMENTAL PERMITS**

Current NPDES Number:

KY0041726

Issue Date of Current Permit:

June 1, 2005

Expiration Date of Current Permit:

December 31, 2007

Number of Times Permit Reissued:

5

Date of Original Permit Issuance:

October 27, 1981

Sludge Disposal Permit Number:

N/A

Kentucky DOW Operational Permit #:

N/A

Kentucky DSMRE Permit Number(s):

N/A

C. Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	Several Jefferson Co. Air Permits	N/A
Solid or Special Waste	Several for offsite disposal at WMX, Inc.	N/A
Hazardous Waste - Registration or Permit	EPA ID: KYD006387021	N/A

**VI. DISCHARGE MONITORING REPORTS (DMRs)**

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). The information in this section serves to specifically identify the department, office or individual you designate as responsible for submitting DMR forms to the Division of Water.

A. Name of department, office or official submitting DMRs:	Douglas P. Wichmann GM of Manufacturing at Appliance Park
B. Address where DMR forms are to be sent. (Complete only if address is different from mailing address in Section I.)	
DMR Mailing Name:	
DMR Mailing Street:	
DMR Mailing City, State, Zip Code:	
DMR Official Telephone Number:	

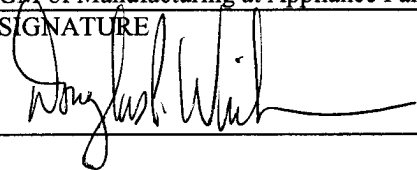
## VII. APPLICATION FILING FEE

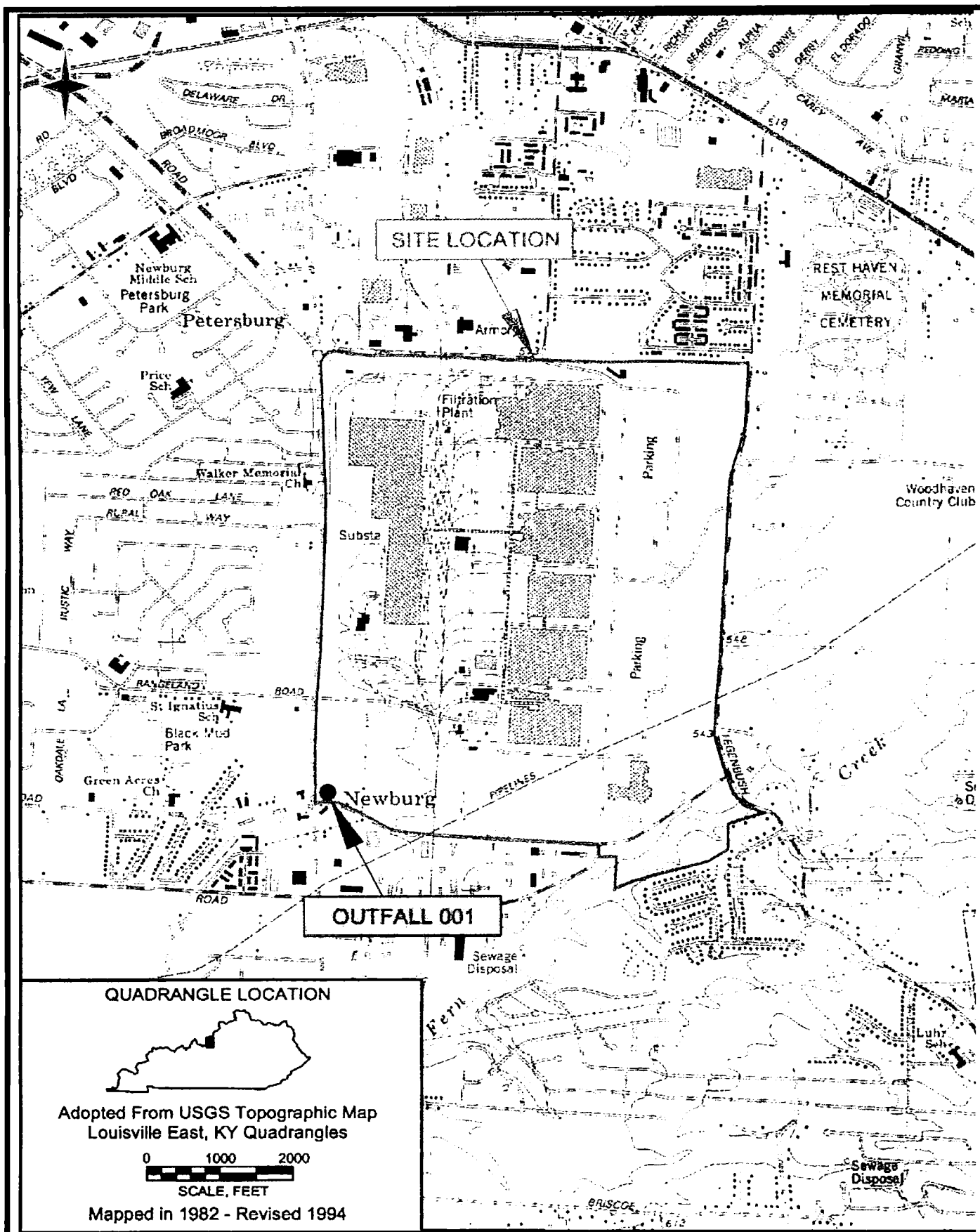
KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:	Permit Renewal Fee Enclosed:
Non-Process Industry ✓	\$ 1000.00

## VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):	TELEPHONE NUMBER (area code and number):
Douglas P. Wichmann GM of Manufacturing at Appliance Park	502-452-7863
SIGNATURE 	DATE: 7-3-07



GE Appliance Park  
Appliance Park  
Louisville, Kentucky



Linebach • Funkhouser, Inc.  
environmental compliance & consulting

Site Location Map

USGS Topographical Map  
1984 Versailles, KY

PROJECT NO: 130-02

Figure:  
Form 1 – Figure 1



## KPDES FORM 1 -- INSTRUCTIONS

Listed below are explanations of select Form 1 questions. If further information is needed concerning any question, please **contact Division of Water, KPDES Branch at (502) 564-3410.**

### I. Facility Location and Contact Information

- A. Use the official or legal name of the business, company, municipality, etc. requesting permit.
- B. The facility name should be the name by which the facility is commonly known and/or uniquely identified. The information given as the facility name and location address should be the actual location of the facility (i.e. road name, highway number, not the P O Box address).
- C. The facility owner/contact address should be the legal permittee of record and is the address where correspondence regarding the application, permit, etc. for the facility will be sent unless otherwise indicated.

### II. Facility Description

- A. Briefly describe the nature of the business and the activities being conducted that require a KPDES permit.
- B. The SIC codes are numbers and descriptions of activities classified by the Executive Office of the President, Office of Management and Budget. These are found in the 1987 Edition of the Standard Industrial Classification (SIC) Manual. List the SIC codes(s) that best describe the products or services provided by the facility in descending order of importance. If an SIC code book is not available, please describe in detail the nature of the business and activities conducted so that an appropriate code can be assigned.

### III. Facility Location

- A. Attach a U.S. Geological Survey (USGS), 7 1/2 minute topographic quadrangle map(s) extending at least one mile beyond the property boundary of the discharge source. Depict or mark the facility and each of its intake and discharge structures. Also mark the locations of those wells, springs, surface water bodies, and drinking water wells listed in public records or otherwise known to the applicant within one-quarter mile of the facility property boundary. USGS maps may be obtained from the University of Kentucky, Mines and Minerals Bldg. Room 106, Lexington, Kentucky 40506. Phone: (859) 257-3896.
- B. List the county and, if applicable, city where facility is located.
- C. List the body of water receiving discharge.
- D. List the latitude and longitude for the facility site. The latitude/longitude reading for the site should be taken at the influent to the wastewater treatment plant, if applicable.
- E. List the method used to obtain the latitude and longitude (i.e. topo map coordinates, GPS reading, etc.)
- F. List the facility's Dun and Bradstreet Number if applicable.

### IV. Owner/Operator Information

- A. Place a check in the applicable type ownership as listed.
- B. These sections must be completed by **all municipal and sanitary wastewater applicants** and other facilities as applicable.

List the name and address of the person who operates the sewage treatment plant.

Indicate if the operator is also the owner.

The operator must be currently certified with the Division of Water. For information concerning those requirements, contact: Division of Water, Certification Section, at (502) 564-3410.

List the Operator's Certification Class and Certification Number.

- V. List any existing environmental permits which the facility has or will be applying for.

- VI. List the address where Discharge Monitoring Report (DMR) forms are to be mailed.

### VII. Application Filing Fee

The payment of a filing fee as listed below must accompany the application for a KPDES Permit. (**Your check must be made payable to "Kentucky State Treasurer."**) This fee will be applied toward the final discharge permit fee. The filing fee is not refundable if the application is withdrawn or the permit is denied. Listed below are the facility categories, associated base fees, and application filing fees. (See the "General Instructions" for definitions of facility categories.)

Facility Category	Base Fee	Application Filing Fee
Major Industry	\$3,200	\$640
Minor Industry	\$2,100	\$420
Non-Process Industry	\$1,000	\$200
Large Non-POTW	\$1,700	\$340
Intermediate Non-POTW	\$1,500	\$300
Small Non-POTW	\$1,000	\$200
Agriculture	\$1,200	\$240
Surface Mining Operation	\$1,200	\$240
501(c)(3)	\$100	\$20

If this application is for a new project, see the General Instructions for the applicable Construction Permit fee.

A permit application cannot be processed unless the application filing fee and (if applicable) construction permit fee is enclosed.

Make your check payable to "Kentucky State Treasurer."

### VIII. Certification

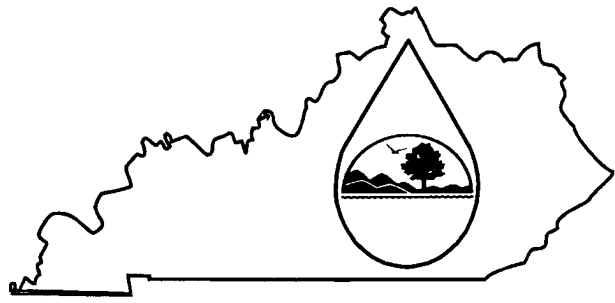
The permit application must be signed as follows:

**Corporation:** by a principal executive officer of at least the level of vice president.

**Partnership or sole proprietorship:** by a general partner or the proprietor respectively.

**Municipality, state, federal, or other public agency:** by either a principal executive officer or ranking elected official.

# KPDES FORM F



## KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

### PERMIT APPLICATION

A complete application consists of this form and Form 1.  
For additional information, Contact KPDES Branch, (502) 564-3410.

#### I. OUTFALL LOCATION

#### AGENCY USE

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and name the receiving water.

A. Outfall Number	B. Latitude			C. Longitude			D. Receiving Water (name)
001	38	9	37.8	85	39	33.8	Unnamed tributary to Blue Spring Ditch

#### II. IMPROVEMENTS

A. Are you now required by any federal, state, or local authority to meet any implementaiton schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

1. Identification of Conditions, Agreements, Etc.	2. Affected Outfalls		3. Brief Description of Project	4. Final Compliance Date	
	No.	Source of Discharge		a. req.	b. proj.
N/A					

B. You may attach additional sheets describing any additional water pollution (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

#### III. SITE DRAINAGE MAP

Attach a site map showing topography (or indicating the outline of drainage areas served by the outfall(s) covered in the application if a topographic map is unavailable) depicting the facility including: each of its intake and discharge structures; the drainage area of each storm water outfall; paved areas and buildings within the drainage area of each storm water outfall, each know past or present areas used for outdoor storage or disposal of significant materials, each existing structural control measure to reduce pollutants in storm water runoff, materials loading and access areas, areas where pesticides, herbicides, soil conditioners and fertilizers are applied; each of its hazardous waste treatment, storage of disposal units (including each area not required to have a RCRA permit which is used for accumulating hazardous waste under 40 CFR 262.34); each well where fluids from the facility are injected underground; springs, and other surface water bodies which receive storm water discharges from the facility.

**IV. NARRATIVE DESCRIPTION OF POLLUTANT SOURCES**

A. For each outfall, provide an estimate of the area (include units) of impervious surfaces (including paved areas and building roofs) drained to the outfall, and an estimate of the total surface area drained by the outfall.

Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)	Outfall Number	Area of Impervious Surface (provide units)	Total Area Drained (provide units)
001	189 acres	630 acres			

B. Provide a narrative description of significant materials that are currently or in the past three years have been treated, stored or disposed in a manner to allow exposure to storm water; method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

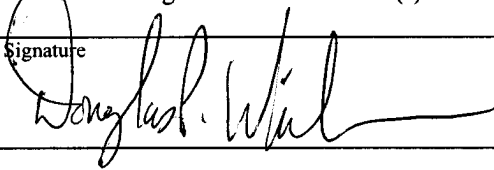
No significant materials currently are, or have been in the past three years, been treated, stored, or disposed of in a manner to allow exposure to stormwater in the 001 watershed. No pesticides, herbicides, soil conditioners, or fertilizers are applied in the 001 watershed, with the exception of occasional applications of Round-up herbicide and Hyvar herbicide to fencelines according to manufacturer's directions.

C. For each outfall, provide the location and a description of existing structural and nonstructural control measures to reduce pollutants in storm water runoff; and a description of the treatment the storm water receives, including the schedule and type of maintenance for control and treatment measures and the ultimate disposal of any solid or fluid wastes other than by discharge.

Outfall Number	Treatment	List Codes from Table F-1
001	Sedimentation, Sorption, Discharge to Surface Water  Structural controls: discharge is released from a retention pond. Booms and skimmers (sorption) are used. Non-structural controls: SPCC plan, periodic visual inspections, employee training, and preventative maintenance.	1-U, 1-X, 4-A

**V. NON-STORM WATER DISCHARGES**

A. I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-storm water discharges, and that all non-storm water discharges from these outfall(s) are identified in either an accompanying Form C or Form SC application for the outfall.

Name and Official Title (type or print)	Signature	Date Signed
Douglas P. Wichmann GM of Manufacturing at Appliance Park		7-3-07

B. Provide a description of the method used, the date of any testing, and the onsite drainage points that were directly observed during a test.

Outfall 001 is a stormwater / non-contact cooling water discharge. A description of testing done to support this certification for Outfall 002 (which has since combined with Outfall 001 to form this Outfall 001) was provided in the original Form F application submitted in 1993. No changes have occurred in the drainage area which add any non-stormwater discharges. Monthly monitoring conducted in the past three years for the currently permitted Outfall 001 does not indicate any non-stormwater discharges.



**VI. SIGNIFICANT LEAKS OR SPILLS**

Provide existing information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak, and the type and amount of material released.

Spills that were reported in the past three years from the date of this application are:

Date	Material	Location	Amount	Date	Material	Location	Amount
------	----------	----------	--------	------	----------	----------	--------

No significant leaks or spills have occurred since last permit renewal.

**VII. DISCHARGE INFORMATION**

A,B,C, & D: See instructions before proceeding. Complete one set of tables for each outfall. Annotate the outfall number in the space provided. Tables F-1, F-2, and F-3 are included on separate pages.

E: Potential discharges not covered by analysis - is any toxic pollutant listed in Table F-2, F-3, or F-4, a substance which you currently use or manufacture as an intermediate or final product or by product.

☐ Yes (list all such pollutants below) ☒ No (go to Section IX)

**VIII. BIOLOGICAL TOXICITY TESTING DATA**

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (list all such results below) ☒ No (go to Section IX)

**IX. CONTRACT ANALYSIS INFORMATION**

Were any of the analyses reported in item VII performed by a contract laboratory or consulting firm?

☒ Yes (list the name, address and telephone number of, and pollutants analyzed by each such laboratory or firm below; use additional sheets if necessary).

☐ No (go to Section IX)

A. Name	B. Address	C. Area Code & Phone No.	D. Pollutants Analyzed
TestAmerica, Inc.	3601 S. Dixie Drive, Dayton, OH 45439	937-294-6856	Monthly DMR analysis for part of 2006.
Microbac Laboratories	3323 Gilmore Industrial Boulevard, Louisville, KY 40213	502-962-6400	All KPDES Renewal analysis and KPDES- Monthly DMR Analyses for 2007

**X. CERTIFICATION**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations.

**NAME & OFFICIAL TITLE (type or print)**

Douglas P. Wichmann  
GM of Manufacturing at Appliance Park

**AREA CODE AND PHONE NO.**

502-452-7863

**SIGNATURE**

**DATE SIGNED**

7-3-07

<b>VII. DISCHARGE INFORMATION</b>	<b>OUTFALL NO: 001</b>
-----------------------------------	------------------------

Part A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 <sup>st</sup> 20 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 <sup>st</sup> 20 Minutes	Flow-weighted Composite		
Oil and Grease	10 mg/L	N/A	5.8 mg/L	N/A	12	
Biological Oxygen Demand BOD <sub>5</sub>	34 mg/L	N/A		N/A	1	Road and railroad
Chemical Oxygen Demand (COD)	38 mg/L	N/A		N/A	1	Road and railroad
Total Suspended Solids (TSS)	44 mg/L	N/A	15 mg/L	N/A	12	Soil particles
Total Kjeldahl Nitrogen	1.5 mg/L	N/A		N/A	1	Soil particles
Nitrate plus Nitrite Nitrogen	0.26 mg/L	N/A		N/A	1	Soil particles
Total Phosphorus	0.25 mg/L	N/A		N/A	1	Soil particles
pH	8.9 grab	N/A	8.0 grab	N/A	12	

Part B - List each pollutant that is limited in an effluent guideline which the facility is subject to or any pollutant listed in the facility's KPDES permit for its process wastewater (if the facility is operating under an existing KPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 <sup>st</sup> 20 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 <sup>st</sup> 20 Minutes	Flow-weighted Composite		
Oil & Grease	10 mg/L	N/A	*	N/A	1	
Styrene	<0.005 mg/L	N/A		N/A	1	
T. Recov. Arsenic	<0.05 mg/L	N/A		N/A	1	
T. Recov. Cadmium	<0.01 mg/L	N/A		N/A	1	
T. Recov. Chromium	<0.01 mg/L	N/A		N/A	1	
T. Recov. Copper	<0.01 mg/L	N/A		N/A	1	Soil particles, road, and railroad
T. Recov. Lead	<0.01 mg/L	N/A		N/A	1	
T. Recov. Mercury	<0.0002 mg/L	N/A		N/A	1	
T. Recov. Nickel	<0.01 mg/L	N/A		N/A	1	
T. Recov. Silver	<0.01 mg/L	N/A		N/A	1	
T. Recov. Zinc	<0.016 mg/L	N/A		N/A	1	Soil particles, road, and railroad
T. Recov. Iron	0.79 mg/L	N/A		N/A	1	Soil particles, road, and railroad
Total Cyanide	<0.01 mg/L	N/A		N/A	1	
T. Recov. Aluminum	<1.0 mg/L	N/A		N/A	1	
T. Recov. Antimony	<0.01 mg/L	N/A		N/A	1	
Trichloroethene	1.3 ug/L	N/A	<0.61 ug/L	N/A	12	
PCBs	.47 ug/L	N/A	0.23 ug/L	N/A	12	

TSS	22 mg/L	N/A	15 mg/L	N/A	1	
pH	8.9 grab	N/A	8.0 grab	N/A	12	
Cyanide Total	<0.01 mg/L	N/A		N/A	1	
Cyanide, Amenable	<0.01 mg/L	N/A		N/A	1	

Part C - List each pollutant shown in Tables F-2, F-3, and F-4 that you know or have reason to believe is present. See the instructions for additional details and requirements. Complete one table for each outfall.

Pollutant and CAS Number (if available)	Maximum Values (include units)		Average Values (include units)		Number of Storm Events Sampled	Sources of Pollutants
	Grab Sample Taken During 1 <sup>st</sup> 20 Minutes	Flow-weighted Composite	Grab Sample Taken During 1 <sup>st</sup> 20 Minutes	Flow-weighted Composite		
T. Recov. Iron	0.79 mg/L	N/A	0.52 mg/L	N/A	12	Soil particles, road, and railroad
T. Recov. Copper	0.02 mg/L	N/A	0.01 mg/L	N/A	12	Soil particles, road, and railroad
T. Recov. Zinc	0.06 mg/L	N/A	0.03 mg/L	N/A	12	Soil particles, road, and railroad
Oil and Grease	10 mg/L	N/A	5.8 mg/L	N/A	12	
TSS	22 mg/L	N/A	15 mg/L	N/A	1	
Fecal Coliform	790 #colonies/100ml	N/A		N/A	1	Wildlife
Styrene	<0.005 mg/l	N/A		N/A		
		N/A		N/A		
		N/A		N/A		
		N/A		N/A		
		N/A		N/A		

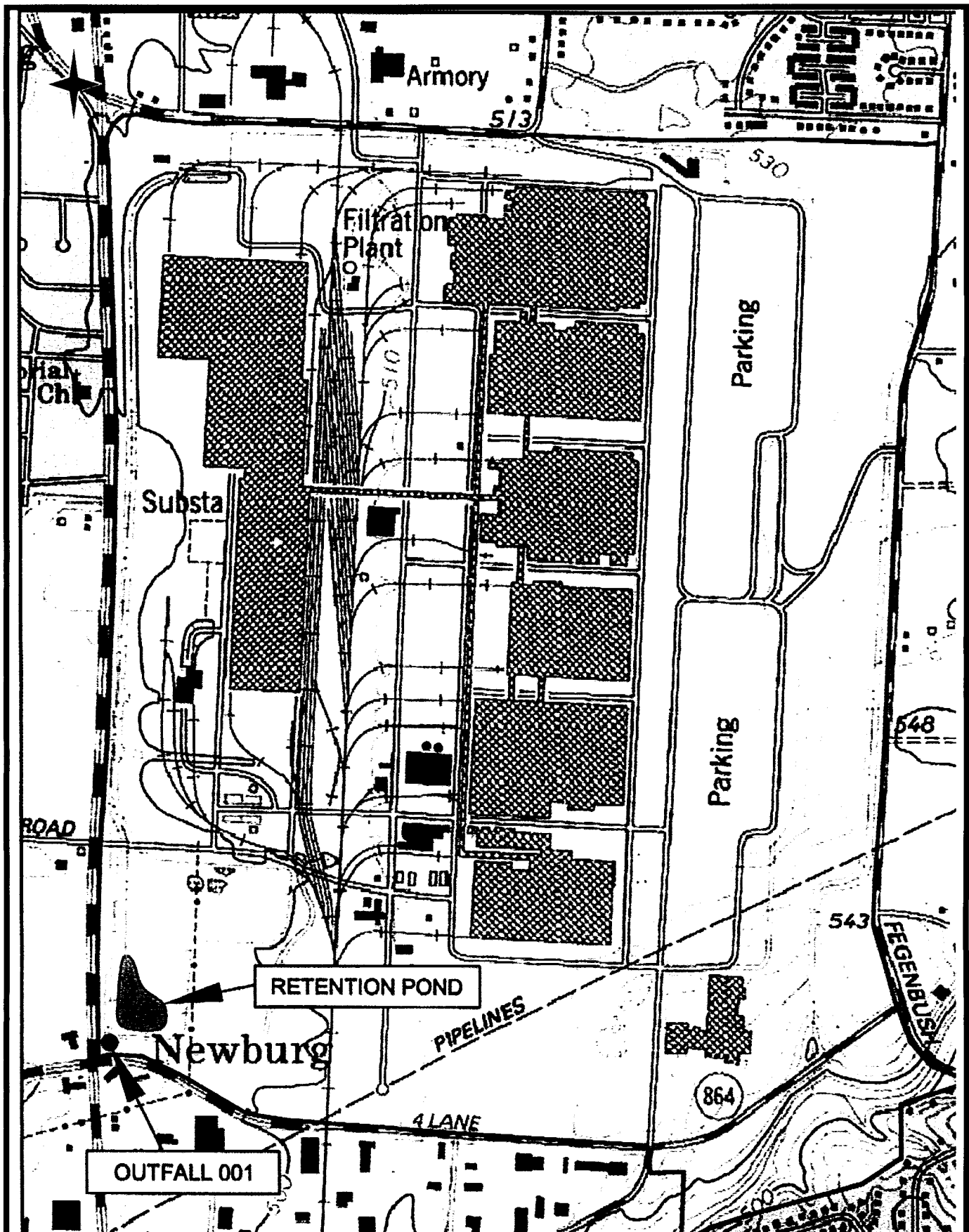
Part D - Provide data for the storm event(s) which resulted in the maximum values for the flow-weighted composite sample.

1. Date of Storm Event	2. Duration of Storm Event (in minutes)	3. Total rainfall during storm event (in inches)	4. Number of hours between beginning of storm measured and end of previous measurable rain event	5. Maximum flow rate during rain event (gal/min or specify units)	6. Total flow from rain event (gallons or specify units)
N/A- All reported samples were taken as grab samples.					

7. Provide a description of the method of flow measurement or estimate.

Flow is estimated by measuring the depth of flow in a culvert with known slope and no backwater effects. The Manning Equation is used to calculate the flow.

## KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM FORM F -- INSTRUCTIONS



GE Appliance Park  
Appliance Park  
Louisville, Kentucky



Linebach & Funkhouser, Inc.  
environmental compliance & consulting

Site Location Map

USGS Topographical Map  
1984 Versailles, KY

PROJECT NO: 130-02

Figure:  
Form F - Figure 1



ERNIE FLETCHER  
GOVERNOR

**ENVIRONMENTAL AND PUBLIC PROTECTION CABINET**

DEPARTMENT FOR ENVIRONMENTAL PROTECTION

DIVISION OF WATER

14 REILLY ROAD

FRANKFORT, KENTUCKY 40601-1190

[www.kentucky.gov](http://www.kentucky.gov)

TERESA J. HILL  
SECRETARY

July 12, 2007

Mr. Douglas P. Winchman  
General Electric Company  
Appliance Park API-D35  
Louisville, Kentucky 40225

Re: Complete KPDES Permit Application  
KPDES No.: KY0041726  
AI ID: 2050  
General Electric Company  
Jefferson County, Kentucky

Dear Mr. Winchman:

Your Kentucky Pollutant Discharge Elimination System (KPDES) permit application for the above-referenced facility was received by the Division of Water on July 5, 2007, and has been determined complete. As per 401 KAR 5:075, Section 1(7), the official effective date of your application has been determined as July 12, 2007, the date of this notice.

A technical review of your permit application will commence in the near future. Please be aware that you may be asked to provide additional information to clarify, modify, or supplement your application material. A request for this additional information will not render your application incomplete.

If you have any questions concerning this matter, please contact Larry Sowder at (502) 564-8158, extension 472.

Sincerely,

**Nancy Green, Program Coordinator**  
Inventory and Data Management Section  
KPDES Branch  
Division of Water

NG:ng  
c: Division of Water Files



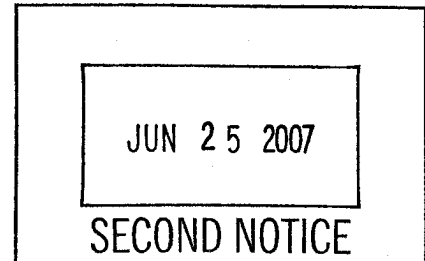
ERNIE FLETCHER  
GOVERNOR

**ENVIRONMENTAL AND PUBLIC PROTECTION CABINET**  
DEPARTMENT FOR ENVIRONMENTAL PROTECTION  
DIVISION OF WATER  
14 REILLY ROAD  
FRANKFORT, KENTUCKY 40601  
[www.kentucky.gov](http://www.kentucky.gov)

TERESA J. HILL  
SECRETARY

May 31, 2007

Mr. Keith Harshman  
General Electric Company  
Appliance Park AP 1-108  
Louisville, Kentucky 40225



RE: KPDES No. KY0041726  
General Electric Company  
Jefferson County, Kentucky

Dear Mr. Harshman:

Our records indicate that your Kentucky Pollutant Discharge Elimination System (KPDES) permit is due to expire on December 31, 2007. According to the KPDES Regulation 401 KAR 5:060, "any person with a currently effective permit shall submit a new application at least 180 days before the expiration of the existing permit..." **The due date for your permit renewal application is July 5, 2007.**

Please complete the enclosed application forms and return to the KPDES Branch, Division of Water, at the above address by the indicated due date. Applications received after the due date are in violation of 401 KAR 5:060, Section 1, which could result in enforcement action being taken.

If you have any questions regarding the completion of these forms, please contact me at (502) 564-8158, extension 470, or Ann Workman at extension 528.

Sincerely,

**Vickie L. Prather, Acting Supervisor**  
Inventory and Data Management Section  
KPDES Branch  
Division of Water

VLP:ASW:asw

Enclosures

C: Louisville Regional Office  
Division of Water Files